

**Eastern Virginia Local Human Rights Committee  
Meeting Minutes  
January 24, 2013**

A meeting of the Eastern Virginia Local Human Rights Committee was held on Thursday, January 24, 2013, at St. Mary's Home for Disabled Children, 6171 Kempsville Circle, Norfolk, VA 23502.

**Members Present:**

Mr. Matthew Albright, Chair  
Ms. Denise Gordon, Vice Chair  
Mr. David Paige, Secretary  
Mr. John Dickinson, Member

**Members Absent:**

None

**Providers Present:**

Jacqueline Parker-Mazyck, SC/QMRP, Holiday House of Portsmouth, Inc  
Melanie Draughn, SW/HRC Liaison, Holiday House of Portsmouth, Inc  
Janice Burrus, Maryview Behavioral Medicine Center  
Glinda O'Neill, Mgr Client Services, Maryview Behavioral Medicine Center  
Melanie Perez-Lopez, SW, St. Mary's Home for Disabled Children  
Theresa Waldo, Psychologist, St. Mary's Home for Disabled Children  
Rizal Cruz, AC Support Systems  
James Artis, Program Manager, Bair Foundation  
Greg LeFever, Administrator, Better Life Services, Inc.  
Ronnie Brown, Owner, Community Options LLC  
Garry Cooley, Supervisor, Community Options LLC  
Patrick Stiehm, Virginia Home Based Counseling  
Yvonne Green, Coordinator, Virginia Home Based Counseling  
Latisha Holloway, Psalms Assistive Support Services LLC  
Aman Massaquoi CEO, Angel House Inc  
Mercedes Santos-Bell, Envision Family Services  
Jacqueline Taylor, Jerious Counseling Services LLC  
Dr. Damon Cary, Cary Associates, LLC

**Providers Absent:**

Abey Malave, A Positive Living

**Also Present Were:**

Stewart Prost, Human Rights Advocate  
Carmen Gerena, EVLHRC Liaison  
Douglas Newsome, Individual Choices  
Deborah Bareika, Individual Choices  
Adrian Sears, Individual Choices

I. **Call to Order**

Matthew Albright, called the regular session of the EVLHRC meeting to order at 9:05am, and Ms. Carmen Gerena, EVLHRC Liaison, recorded the minutes. A quorum of members was present, and the meeting, having been duly convened, was ready to proceed.

II. **Approval of Meeting Agenda**

There were two changes made to the Agenda by Matthew Albright, he asked St. Mary's Home if they would like to report on St. Mary's Home and The Albergo House at the same time, at which they replied yes. Also since we did not have a new committee member to present we would take that item off the agenda.

Meeting agenda was reviewed. The Agenda was approved as amended, motion made by Mr. John Dickinson and seconded by Ms. Denise Gordon and was unanimously approved.

III. **Review of Minutes**

A motion to accept the minutes as presented by Mr. Matthew Albright and was motioned by Mr. John Dickinson and seconded by Mr. David Paige. Minutes were unanimously approved.

IV. **Public Comment**

There were no members of the public present.

V. **Old Business**

There was no old business.

VI. **New Business**

Mr. Albright noted that there was a training for Local Human Rights Committees. It was done at Eastern State and there was a nice turn out. The training went well; they had a mock meeting that was well presented. They showed how to conduct hearings should we ever have to do that.

VII. **Program Updates**

i. **The Bair Foundation**

James Artis, Program Director from Richmond presented. There are no clients in the Tidewater area yet. The Bair Foundation provides Treatment Foster Care and In-home services.

ii. **Community Options**

Ronnie Brown, Program Director introduced Mr. Garry Cooley who is the supervisor of the group home now and he will now be attending our LHRC meetings. They did not have anything to report. Quarterly and annual reports were sent in.

- iii. **Holiday House of Portsmouth, Inc**  
Jacqueline Parker Mazyck presented, there was 1 allegation of abuse in October and no complaints and we have 2 individuals with behavior plans. We will be meeting in executive session.
- iv. **Maryview Behavioral Medicine Center**  
Glinda O'Neill Manager of Clinical Services and Business Operations presented their report. There were 2 reports of abuse and both have been closed. There was 1 report of a complaint. We will be meeting in executive session.
- v. **Psalms Assistive Support Services**  
Latasha Holloway presented. They are not yet licensed, so she had nothing to report.
- vi. **AC Support System**  
Rizal Cruz presented. There were no complaints or allegations. Reports were submitted.
- vii. **St. Mary's Home for Disabled Children / The Albero House**  
Melanie Perez-Lopez presented. Reports were submitted. There are no incidents of abuse or neglect and no complaints. Census is at 84. In regards to The Albero House, we have not taken possession of the building as of yet and we are not licensed yet, we are anticipating possibly March. Matt Albright mentioned that The Albero is part of St. Mary's Home. We will be meeting in executive session.
- viii. **Better Life Services**  
Greg LeFever presented. We have 0 cases of abuse, allegations or neglect to report. Our census is at 71.
- ix. **A Positive Living**  
No representation present. Stewart Prost mentioned that he received an email that stated that they were not licensed and would not be able to make the meeting.  
  
Matt Albright stated that if an emergency came up and you are not going to be able to attend the meeting, please give Carmen a call and she will notify the members of the committee.
- x. **VA Home Based Counseling**  
Yvonne Green presented. There have been no allegations of abuse or neglect. We are currently servicing 30 clients in Virginia and 10 in PA. I will be the one attending the meetings from now on. Mr. Stiehm stated that they had done the training of 'Holding with Care' and have been holding off on implementation until we get the okay from the LHRC to implement. Stewart Prost stated that he looked it over and it is fine and that he recommended it's approval. Mr. John Dickinson made a motion for approval and it was seconded by Mr. David Paige. It was unanimously approved.

- xi. **Angel House**  
Aman Massaquoi presented. Still unlicensed and have no incidents to report. We are still waiting for final inspection for licensing.
- xii. **Envision Family Services**  
Mercedes Santos Bell, Executive Director presented. As of December we were servicing 10 clients, as of today we have 13 clients. We have no incidents to report. We are a therapeutic day treatment and are servicing 1 school. We are servicing an elementary school in Portsmouth.
- xiii. **Jerious Counseling Group**  
Jacqueline Taylor, CEO presented. We are not licensed yet. We had our 1<sup>st</sup> visit and are waiting for our 2<sup>nd</sup>. All reports were submitted.
- xiv. **Cary Associates Youth Empowerment Services**  
Dr. Damon Cary reported. We did submit our annual and quarterly reports. We are not licensed yet.
- xv. **Office of Human Rights**  
Mr. Stewart Prost updated the status of this committee. Mr. Prost mentioned that the committee has 1 vacancy. It is the general vacancy spot that can be filled by a family member, a professional, anyone who is interested on servicing on the committee. Matt Albright stated that any of the providers can recommend someone who is interested. Mr. Prost stated that the only disqualifying criteria for that one vacancy, is that it cannot be an employee of any program that is an affiliate of this committee. All that you do is fill out an application. If you need one please email Mr. Prost. The application can also be found on the Department's website. It was asked that would the commitment be for this vacancy and Mr. Prost stated that the committee meets 4 times a year and for new members there is a training that lasts about 3 hours. The only additional item would be if there are any special meetings. It is a 3 year commitment and then you can serve 2 consecutive 3 year commitments. In terms of the current membership, there is no one who is leaving this year or is ready for their 2<sup>nd</sup> term.

Mr. Prost reviewed quarterly and annual reports. Mr. Prost mentioned that most of the information just reminders. We are really tightening up on getting the reports in and on having affiliates/providers attend the meetings or sending representatives. Mr. Prost also stated that if you are licensed and fail to do any of these things, I may be forced to send a note to your licensing specialist requesting citation, because you have the bylaws and the cooperative agreement and you have the regulations that state that you are going to participate and support the committee and provide the committee with what it needs and one of them is the reports and your presence. He also stated that this committee has chosen to require people to come to meetings 4 times a year, so it is really important to attend meetings and send in reports. Mr. Prost also stated that under the LHRC liaison, many tend to put his name in there, but he is not the liaison you are. Also particularly on the quarterly reports be sure to fill out the information on the last page and please do not put not applicable, put 'none' as it is all applicable.

Mr. Prost also spoke about CHRIS – Comprehensive Human Rights Information System. This system has been in place since 1991 with the state facilities. So Eastern State and South Eastern Virginia training center, it was their way to enter in data on abuse and neglect and complaints. Some of this is being spurred on by the Department of Justice Settlement, because for years they were talking about developing this system for the community programs and it is finally going to happen. What it is going to do, is that you will need to have an internet connect and when you have an allegation of abuse and neglect or a complaint, currently what all of you are supposed to do is you fax a report to our office in Williamsburg, so what is going to happen is that instead of faxing those reports you are going to enter them into CHRIS, so that means that when you have an allegation, you will be responsible for putting the data into the CHRIS data base and also give the data on your investigation, outcomes and findings on any abuse allegation, any allegation of neglect, any complaint. Also you are currently faxing to the central office in Richmond your deaths and serious injury notices, those will also go into CHRIS. CHRIS is going to be put out in phases. You will be accessing CHRIS through a secure server called Delta and you need to identify someone who will be the person who will get all the security for your agency. Phase I is involving state operated facilities and CSB primarily and some large private providers. Phase II is any provider providing services to people with intellectual disabilities. Phase I is supposed to go live on February 5<sup>th</sup> and Phase II is supposed to go live on March 1. That means that you need to start entering data in. Mr. Prost stated that his understanding is that if you are in Phases I or II, you've gotten the notices from the Department. If you are a provider you may want to check with your licensing specialist on those certain details. There are going to be webinars about this and there was one yesterday that lasted 2 ½ hours, there will be one on January 29<sup>th</sup> at 2pm and a couple are scheduled for February and I don't have the dates for those. There will also be a training module about it again on our website. What it is going to do is probably make less paper for one thing and also give the department a way of tracking all of these cases easier than the way we have been doing it now. However, in regent 5 we are still requiring that when you do an abuse investigation you still send in your report. All of the timelines that are required to that hold. I think it is going to be easier for us to be aware of where you are in those timelines once you make a report. Regulations require that if you have an abuse allegation, an allegation of abuse and neglect, or a complaint be it formal or informal, you have to report that to the office within 24 hours. For Providers in Phase I and II it is going to be after March that you will be entering it into the CHRIS database instead. The same thing goes for deaths and serious injuries. What will happen is, that when you start entering that data an email will go to our office saying, such provider has added in a new complaint or abuse allegation, so we can go take a look at it and we also have to write an action on it, saying we reviewed the report, we've seen the report before you can even close the case. You will also be responsible for closing those cases in the system. That will be starting for some of you in February, but for most of you if you receive ID services in March. If for example, Maryview acute psychiatric, intensive in home providers, anyone doing behavioral health services, you will probably be May or June before you are on the system, so you will continue to send your reports the way you have always been doing. Mr. Prost also spoke about his email about seclusion and restraint those are due by January 15, get

those to Mary Clare O'Hare. They do not have to go to this committee or to me. The annual seclusion and restraint reports are due every year. If you are not licensed you don't have to do it yet, once you are licensed you will have to do it.

xvi. **Request for Affiliation by Individual Choices**

Douglas Newsome, Deborah Bareika, Adrian Sears, owners introduced themselves. Tomeka Futrell was not present today. Mr. Newsome gave detailed information on Individual Choices. It is a sponsored residential program. It is like adult foster care for people with intellectual disabilities. We are still waiting to be licensed. Will be using TOVA for behaviors concerns. Mr. Newsome is a TOVA instructor as well as a licensed professional counselor. Ms. Futrell is a Registered Nurse and will be doing all of the medical training. We will be serving the adult population 18 years and over. Mr. Prost reminded Individual Choices that every time they add a sponsor location they must let his office know. Mr. Prost mentioned that he did a review of the program rules and the behavioral management policies and there were no problems with them, so he would support granting the affiliation and approving the behavior management policy and program rules. There being no further questions for Individual Choices, Mr. David Paige made the motion to accept that Individual Choices by affiliated with this committee. The motion was seconded by Mr. John Dickinson. It was amended that we accept Individual Choices' behavioral plans and program rules it was moved by Mr. David Paige and seconded by Mr. John Dickinson. It was unanimously approved.

VIII. **Open Session**

There were no items for open session.

IX. **Closed Session for Human Rights Complaints, Abuse, Discrimination, Formal/Informal Complaints:**

At 10:30am Ms. Denise Gordon moved the EVLHRC go into executive session pursuant to the Virginia Code Section 2.2-3711 A (4) for the protection of the privacy of individuals in personal matters not related to public business. Namely for the purpose of reviewing behavior programming and client specific data and/or complaints, and or investigations for authorized representatives for Holiday House of Portsmouth, Inc, Maryview Behavioral Medicine Center, and St. Mary's Home for Disabled Children: see attached reports. Motion was made by Mr. John Dickinson and seconded by Mr. David Paige. All members present voted in favor of the motion. The motion was made to accept the information given during closed Executive Session and go into open session. All members present voted in favor of the motion.

Upon reconvening in open session, each member of EVLHRC certified that, to the best of each EVLHRC Member's knowledge, only public business matters lawfully exempted from statutory open meeting requirements, and only public business matters identified in the motion to convene the executive session were discussed in the executive session. See attached record of Executive Session.

X. **Adjournment**

The meeting adjourned at 11:10 a.m.

XI. **Next Meeting:**

The next meeting of the Eastern Virginia Local Human Rights Committee will be held on Thursday, April 25, 2013, at St. Mary's Home for Disabled Children, 6171 Kempsville Circle, Norfolk, VA 23502. St. Mary's Home for Disabled Children will provide refreshments.

## **Provider Quarterly Report of Human Rights Activities**

Name of Provider: Holiday House of Portsmouth, Inc ICF/ID

Local Human Rights Committee: Eastern Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Melanie J. Draughn, BSW, QMRP

Name of Licensing Specialist: Nathan Woodard, Licensing Specialist

Number of individuals served by provider in this quarter: 28

Quarter: October, November, December 2012

### **Status of Allegations of Abuse and Neglect**

Number of Abuse Allegation cases: 1

Cases Pending: 1

Cases Closed: 0

#### **October 2012**

##### **Total Counts Alleged by Type:**

Physical: 1 Sexual: 0 \_\_\_\_\_

Verbal: 0 \_\_\_\_\_ Neglect: 0 \_\_\_\_\_

Neglect (Peer to Peer) 0 \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: Restraint: \_\_\_\_\_

#### **November 2012**

##### **Total Counts Occurred by Type:**

Physical: 0 Sexual: 0 \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer):

Exploitation: \_\_\_\_\_

Other: Restraint: \_\_\_\_\_

#### **December 2012**

##### **Total Counts Alleged by Type:**

Physical: \_\_\_\_\_

Sexual: \_\_\_\_\_



Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer)

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

**Provide details, by date of occurrence, of all cases. Include any required Corrective Action.**

**See additional documentation provided**

**Status of Complaint Cases**

Total of Complaint Cases: \_\_\_\_\_ 0 \_\_\_\_\_

Number of cases resulting in a violation: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Pending: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Closed: \_\_\_\_\_ 0 \_\_\_\_\_

**Complaint Category Totals:**

Assurance of Rights: \_\_\_\_\_ 0 \_\_\_\_\_

Dignity: \_\_\_\_\_ 0 \_\_\_\_\_

Services: \_\_\_\_\_ 0 \_\_\_\_\_

Participation in Decision Making: \_\_\_\_\_ 0 \_\_\_\_\_

Confidentiality: \_\_\_\_\_ 0 \_\_\_\_\_

Access to an Amendment of Services record: \_\_\_\_\_ 0 \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_ 0 \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_ 0 \_\_\_\_\_

Work: \_\_\_\_\_ 0 \_\_\_\_\_

Research: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint and Fair Hearing; 0

Determination of Capacity to give consent: 0

Authorized Representatives: 0

Complaint Resolution: 0

Reporting Requirements: 0

**Complaint Resolution Level:**

Number of complaints resolved in the Informal Process: 0

Number of complaints resolved in the Formal Process: 0

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

**Additional reporting and review requirements as applicable:**

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

***Allegations of Abuse:*** Holiday House of Portsmouth uses the following efforts to ensure allegations of abuse and neglect are captured as reported by the regulations. Upon receipt of any allegation of abuse or neglect this facility takes steps to protect the safety and welfare of the individual, suspend the suspected employee pending outcome of the investigation, ensure that Human Rights Advocate and Regulatory Authorities have been notified within a 24 hour time frame, and completed within a 5 day time frame. This facility notifies parents and child protective services.

***Human Rights Complaints:*** A procedure is established to allow for individuals or their parents/ authorized representatives to present their dissatisfaction with any aspect of the Holiday House program, and to seek satisfactory redress and resolution. The Holiday house will make every attempt to resolve complaints at earliest possible step. The Holiday House of Portsmouth will provide assistance and support to individual with the complaint process.

**Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.**

Holiday House of Portsmouth, Inc has not had any changes to DBHDS license, or citations for this quarter.

**Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.**

**None**

**Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.**

An attempt to recruit a member was done by Holiday House of Portsmouth on October 15, 2012 to a parent that currently has a child in the HHP program; however this particular parent declined due to her feelings that it would a conflict of interest while her child continues to reside in the HHP program.

**Quarterly Review of any Behavioral Plans involving the use of restraint or time out:**

KA (Peek-a boo) Mitt

AP: (Protective Headgear)

## Provider Quarterly Report of Human Rights Activities

Name of Provider: Maryview Behavioral Medicine Services

Local Human Rights Committee: Eastern Virginia LHRC

Name of Provider LHRC Liaison: Lucy Rotich, RN, BSN, MSA, Nurse Manager

Name of Licensing Specialist: Reginald Daye, Dept. of Behavioral Health and Developmental Services

Number of individuals served by provider in this quarter: 613

Quarter October, November and December 4th Quarter

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 2

Cases Pending:

Cases Closed: 2

#### Total Counts Alleged by Type:

Physical: 1 Sexual: \_\_\_\_\_

Verbal: 1 Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

#### Total Counts Occurred by Type:

Physical 0 Sexual: \_\_\_\_\_

Verbal: 0 Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: 2

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

(see details of each occurrence under separate cover)

## Status of Complaint Cases

Total of Complaint Cases: 1

Number of cases resulting in a violation: \_\_\_\_\_

Cases Pending: \_\_\_\_\_

Cases Closed: 1

## Complaint Category Totals:

Assurance of Rights: 1

Dignity: \_\_\_\_\_

Services: \_\_\_\_\_

Participation in Decision Making: \_\_\_\_\_

Confidentiality: \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_

Work: \_\_\_\_\_

Research: \_\_\_\_\_

Complaint and Fair Hearing: \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_

Complaint Resolution: 1

Reporting Requirements: \_\_\_\_\_

## Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 1

Number of complaints resolved in the Formal Process: \_\_\_\_\_ 2

Below Director: \_\_\_\_\_ 1

Director: \_\_\_\_\_ 2

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

### **Additional reporting and review requirements as applicable:**

**Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.**

**Patients are provided with a copy of rights on admission and this is repeated as a part of program each day.  
Nurse managers, supervisors and directors are informed of any allegations by patient and investigates.**

**Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.**

**None.**

**Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.**

**New policy on restraint prohibits 4 point restraint for children 12 and younger.**

**Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.**

**Quarterly Review of any Behavioral Plans involving the use of restraint or time out:**

## Provider Annual Report of Human Rights Activities

Name of Provider: Maryview Behavioral Medicine Services

Local Human Rights Committee: Eastern Virginia

Name of Provider LHRC Liaison: Lucy Rotich, RN, BSN, MSA, Nurse Manager

Name of Licensing Specialist: Reginald Daye, Dept. Behavioral Health & Developmental Services

Number of individuals served by provider this year: 2377

Year: 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 2

Cases Pending: 0

Cases Closed: 2

#### Total Counts Alleged by Type:

Physical: 1 Sexual: 0

Verbal: 1 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

#### Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 22

### Status of Complaint Cases

Total of Complaint Cases : 10

Number of cases resulting in a violation: 0

Cases Pending: 0

Cases Closed: 10



**Complaint Category Totals:**

Assurance of Rights: 9

Dignity: 1

Services:           

Participation in Decision Making: 0

Confidentiality: 0

Access to and Amendment of Services record: 0

Restrictions on Freedoms of Everyday Life: 0

Use of Seclusion Restraint and Time Out: 0

Work:           

Research:           

Complaint and Fair Hearing:           

Determination of Capacity to give consent:           

Authorized Representatives:           

Complaint Resolution: 10

Reporting Requirements:           

**Complaint Resolution Level:**

Total Number of complaints resolved in the Informal Process:           

Total Number of complaints resolved in the Formal Process: 10

Below Director:           

Director: 10

Commissioner:           

LHRC:           

SHRC:

## Provider Quarterly Report of Human Rights Activities

Name of Provider: St. Mary's Home for Disabled Children

I Human Rights Committee: Eastern Virginia LHRC

Name of Provider LHRC Liaison: Melanie Perez-Lopez

Name of Licensing Specialist: Dennis Riddick/ Nate Woolard \_\_\_\_\_

Number of individuals served by provider in this quarter: 84 \_\_\_\_\_

Quarter : October 1 to December 31, 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

#### Total Counts Alleged by Type:

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: 0 Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

#### Total Counts Occurred by Type:

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: 0 \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

## Status of Complaint Cases

Total of Complaint Cases: : \_\_\_\_\_ 0 \_\_\_\_\_

Number of cases resulting in a violation: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Pending: 0 \_\_\_\_\_

Cases Closed: \_\_\_\_\_ 0 \_\_\_\_\_

## Complaint Category Totals:

Assurance of Rights: \_\_\_\_\_

Dignity: \_\_\_\_\_

Services: \_\_\_\_\_

Participation in Decision Making; \_\_\_\_\_

Confidentiality: \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_

Work: \_\_\_\_\_

Research: \_\_\_\_\_

Complaint and Fair Hearing; \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_

## Complaint Resolution Level:

Number of complaints resolved in the Informal Process: \_\_\_\_\_ 0 \_\_\_\_\_

Number of complaints resolved in the Formal Process: \_\_\_\_\_ 0 \_\_\_\_\_

Below Director:\_\_\_\_\_

Director:\_\_\_\_\_

Commissioner:\_\_\_\_\_

LHRC:\_\_\_\_\_

SHRC:\_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

### **Additional reporting and review requirements as applicable:**

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

**St. Mary's HDC process is a reporting of any "event" on an Event Report and daily "huddle" (M-F) to address the reports with key staff. QI reports any events of alleged abuse or neglect to Social Work immediately upon receipt. Staff can also directly report to Social Work in writing (privately and confidentially) or verbally any suspected abuse/ neglect referrals.**

**Staff Development does an annual inservice on our Human Rights policy and our Abuse and Neglect policy. They also orient any new employees.**

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

**St. Mary's is adding the Albergo House to our existing license which will house 12 adults over the age of 22. We anticipate that our residents will transition to the Albergo House as they age-out of the Children's facility. We will seek affiliation with the EVLHRC at this meeting.**

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

**St. Mary's HDC has not added any new policies, procedures or programs. The Albergo House (for adults) should be opening in February of 2013, however we anticipate that the Human Rights policy and procedures will follow our established policies as in the Children's facility.**

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

See report from last quarter.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

St. Mary's HDC received a variance to have our behavior plans reviewed by our SCC.

Plans are to be reviewed by our Positive Behavior Support Committee and SCC in January, 2013.

## Provider Annual Report of Human Rights Activities

Name of Provider: St. Mary's Home for Disabled Children\_\_\_\_\_

Local Human Rights Committee: Eastern Virginia LHRC

Name of Provider LHRC Liaison: Melanie Perez-Lopez

Name of Licensing Specialist: Nate Woolard

Number of individuals served by provider this year: 84

Year: 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 2

Cases Pending: 0

Cases Closed: 3

#### Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 3 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

#### Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

### Status of Complaint Cases

Total of Complaint Cases : 1

Number of cases resulting in a violation: 0

Cases Pending: 0

Cases Closed: 1

**Complaint Category Totals:**

Assurance of Rights: \_\_\_\_\_

Dignity: \_\_\_\_\_

Services: \_\_\_\_\_

Participation in Decision Making: \_\_\_\_\_

Confidentiality: \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_

Work: \_\_\_\_\_

Research: \_\_\_\_\_

Complaint and Fair Hearing: \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_

**Complaint Resolution Level:**Total Number of complaints resolved in the Informal Process:   1  Total Number of complaints resolved in the Formal Process:   0  Below Director:       1      

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_

## **Provider Quarterly Report of Human Rights Activities**

Name of Provider: AC SUPPORT SYSTEMS, LLC

Local Human Rights Committee: Easter Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Reginald Daye

Name of Licensing Specialist: NERISSA RHODES

Number of individuals served by provider in this quarter: 5

Quarter : 1<sup>st</sup> – January 15, 2013

### **Status of Allegations of Abuse and Neglect**

Number of Abuse Allegation cases: 0

Cases Pending: n/a

Cases Closed: n/a

### **Total Counts Alleged by Type: Total Counts Occurred by Type:**

Physical: 0 Sexual: 0 Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0 Verbal: 0 Neglect: 0

Neglect (Peer to Peer: 0 Neglect (Peer to Peer): 0

Exploitation: 0 Exploitation: 0

Other: 0 Restraint: 0 Other: 0 Restraint: 0

### **Provide details, by date of occurrence, of all cases. Include any required Corrective Action.**

NONE Department of Behavioral Health and Developmental Services Office of Human Rights

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## **Status of Complaint Cases**

Total of Complaint Cases: : 0

Number of cases resulting in a violation: 0

Cases Pending: n/a

Cases Closed: n/a

### **Complaint Category Totals:**

Assurance of Rights: 0

Dignity: 0

Services: 0

Participation in Decision Making; 0

Confidentiality: 0

Access to and Amendment of Services record: 0

Restrictions on Freedoms of Everyday Life: 0

Use of Seclusion Restraint and Time Out: 0

Work: 0

Research: 0

Complaint and Fair Hearing; 0

Determination of Capacity to give consent: 0

Authorized Representatives: 0

Complaint Resolution: 0

Reporting Requirements: 0

### **Complaint Resolution Level:**

Number of complaints resolved in the Informal Process: n/a

Number of complaints resolved in the Formal Process: n/a

Below Director: n/a

Director: n/a

Commissioner: n/a

LHRC: n/a

SHRC: n/a

### **Provide details, by date of occurrence, of all cases that resulted in the following:**

a violation,

a request for fact-finding (LHRC hearing)

a Corrective Action Plan

Department of Behavioral Health and Developmental Services Office of Human Rights

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**Additional reporting and review requirements as applicable:**

**Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.**

AC SUPPORT SYSTEMS LLC performed initial staff trainings to ensure that all staff are aware of the Human Rights regulations and reporting policies and will continue to do quarterly trainings.

**Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.**

AC SUPPORT SYSTEMS added a second location in VA Beach ( 4713 Haygood Point Rd ) which open last November 2012. ACSS admitted one (1) new individual last November 2012.

**Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.**

AC SUPPORT SYSTEMS LLC has not added any new policies or procedures

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

n/a

**Quarterly Review of any Behavioral Plans involving the use of restraint or time out:**

AC SUPPORT SYSTEMS LLC does not use restraint or time out.

## **Provider Annual Report of Human Rights Activities**

Name of Provider: AC SUPPORT SYSYEMS LLC

Local Human Rights Committee: Eastern Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Reginald Daye

Name of Licensing Specialist: \_\_NERISSA RHODES\_\_\_\_\_

Number of individuals served by provider this year: 5

Year: 2012

### **Status of Allegations of Abuse and Neglect**

Number of Abuse Allegation cases: 0

Cases Pending: n/a

Cases Closed: n/a

**Total Counts Alleged by Type: 0 Total Counts Occurred by Type: 0**

Physical: Sexual: Physical: Sexual:

Verbal: Neglect: Verbal: Neglect:

Neglect (Peer to Peer: Neglect (Peer to Peer):

Exploitation: Exploitation:

Other: Restraint: Other: Restraint:

### **Status of Complaint Cases**

Total of Complaint Cases : 0

Number of cases resulting in a violation: 0

Cases Pending: N/A

Cases Closed: N/A

### **Complaint Category Totals: 0**

Assurance of Rights: 0

Dignity: 0

Services: 0

Participation in Decision Making: 0

Confidentiality: 0

Access to and Amendment of Services record: 0

Restrictions on Freedoms of Everyday Life: 0

Use of Seclusion Restraint and Time Out: 0

Work: 0

Research: 0 Department of Behavioral Health and Developmental Services Office of Human Rights

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Complaint and Fair Hearing: 0

Determination of Capacity to give consent: 0

Authorized Representatives: 0

Complaint Resolution: 0

Reporting Requirements: 0

**Complaint Resolution Level: n/a**

Total Number of complaints resolved in the Informal Process: 0

Total Number of complaints resolved in the Formal Process: 0

Below Director:

Director:

Commissioner:

LHRC:

SHRC

## Provider Annual Report of Human Rights Activities

Name of Provider: The Bair Foundation

Local Human Rights Committee: EVLHRC

Name of Provider LHRC Liaison: James Artis

Name of Licensing Specialist: Sharon Stroble

Number of individuals served by provider this year: 0

Year: 2012       

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending:       

Cases Closed:       

#### Total Counts Alleged by Type:

Physical:        Sexual:       

Verbal:        Neglect:       

Neglect (Peer to Peer):       

Exploitation:       

Other:        Restraint:       

#### Total Counts Occurred by Type:

Physical:        Sexual:       

Verbal:        Neglect:       

Neglect (Peer to Peer):       

Exploitation:       

Other:        Restraint:       

### Status of Complaint Cases

Total of Complaint Cases : 0

Number of cases resulting in a violation:       

Cases Pending:       

Cases Closed:

**Complaint Category Totals:**

Assurance of Rights: \_\_\_\_\_

Dignity: \_\_\_\_\_

Services: \_\_\_\_\_

Participation in Decision Making: \_\_\_\_\_

Confidentiality: \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_

Work: \_\_\_\_\_

Research: \_\_\_\_\_

Complaint and Fair Hearing: \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_

**Complaint Resolution Level:**Total Number of complaints resolved in the Informal Process:   0  Total Number of complaints resolved in the Formal Process:   0  

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_

## Provider Quarterly Report of Human Rights Activities

Name of Provider: Better Life Services, Inc.

Local Human Rights Committee: Eastern Region

Name of Provider LHRC Liaison: Greg LeFever

Name of Licensing Specialist: Barry Lee

Number of individuals served by provider in this quarter: 71

Quarter : Oct 1– Dec 31, 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

#### Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

#### Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

## Status of Complaint Cases

Total of Complaint Cases: : \_\_\_\_\_ 0 \_\_\_\_\_

Number of cases resulting in a violation: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Pending: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Closed: \_\_\_\_\_ 0 \_\_\_\_\_

## Complaint Category Totals:

Assurance of Rights: \_\_\_\_\_ 0 \_\_\_\_\_

Dignity: \_\_\_\_\_ 0 \_\_\_\_\_

Services: \_\_\_\_\_ 0 \_\_\_\_\_

Participation in Decision Making; \_\_\_\_\_ 0 \_\_\_\_\_

Confidentiality: \_\_\_\_\_ 0 \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_ 0 \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_ 0 \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_ 0 \_\_\_\_\_

Work: \_\_\_\_\_

Research: \_\_\_\_\_

Complaint and Fair Hearing; \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_



**Complaint Resolution Level:**

Number of complaints resolved in the Informal Process: \_\_\_\_\_

Number of complaints resolved in the Formal Process: \_\_\_\_\_

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

**Additional reporting and review requirements as applicable:**

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

## Provider Quarterly Report of Human Rights Activities

Name of Provider: Community Options, LLC

Local Human Rights Committee: Easter Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Reginald Daye

Name of Licensing Specialist: Dennis Riddick

Number of individuals served by provider in this quarter: 3

Quarter : 1<sup>st</sup> – January 15, 2013

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: n/a

Cases Closed: n/a

#### Total Counts Alleged by Type:

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

#### Total Counts Occurred by Type:

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

## Status of Complaint Cases

Total of Complaint Cases: : \_\_\_\_\_ 0 \_\_\_\_\_

Number of cases resulting in a violation: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Pending: \_\_\_\_\_ n/a \_\_\_\_\_

Cases Closed: \_\_\_\_\_ n/a \_\_\_\_\_

## Complaint Category Totals:

Assurance of Rights: \_\_\_\_\_ 0 \_\_\_\_\_

Dignity: \_\_\_\_\_ 0 \_\_\_\_\_

Services: \_\_\_\_\_ 0 \_\_\_\_\_

Participation in Decision Making; \_\_\_\_\_ 0 \_\_\_\_\_

Confidentiality: \_\_\_\_\_ 0 \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_ 0 \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_ 0 \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_ 0 \_\_\_\_\_

Work: \_\_\_\_\_ 0 \_\_\_\_\_

Research: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint and Fair Hearing; \_\_\_\_\_ 0 \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_ 0 \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_ 0 \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_ 0 \_\_\_\_\_

## Complaint Resolution Level:

Number of complaints resolved in the Informal Process: \_\_\_\_\_ n/a \_\_\_\_\_

Number of complaints resolved in the Formal Process: \_\_\_\_\_ n/a \_\_\_\_\_

Below Director: \_\_\_\_\_ n/a \_\_\_\_\_

Director: \_\_\_\_\_ n/a \_\_\_\_\_

Commissioner: \_\_\_\_\_ n/a \_\_\_\_\_

LHRC: \_\_\_\_\_ n/a \_\_\_\_\_

SHRC: \_\_\_\_\_ n/a \_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

**Additional reporting and review requirements as applicable:**

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

none

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

none

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

none

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

n/a

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

n/a

## Provider Annual Report of Human Rights Activities

Name of Provider: Community Options, LLC

Local Human Rights Committee: Eastern Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Reginald Daye

Name of Licensing Specialist: Dennis Riddick

Number of individuals served by provider this year: 3

Year: 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: n/a

Cases Closed: n/a

#### Total Counts Alleged by Type: 0

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

#### Total Counts Occurred by Type: 0

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

### Status of Complaint Cases

Total of Complaint Cases : 0

Number of cases resulting in a violation: 0

Cases Pending: N/A

Cases Closed: N/A

**Complaint Category Totals: 0**Assurance of Rights: 0Dignity: 0Services: 0Participation in Decision Making: 0Confidentiality: 0Access to and Amendment of Services record: 0Restrictions on Freedoms of Everyday Life: 0Use of Seclusion Restraint and Time Out: 0Work: 0Research: 0Complaint and Fair Hearing: 0Determination of Capacity to give consent: 0Authorized Representatives: 0Complaint Resolution: 0Reporting Requirements: 0**Complaint Resolution Level: n/a**Total Number of complaints resolved in the Informal Process: 0Total Number of complaints resolved in the Formal Process: 0

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_



## Provider Quarterly Report of Human Rights Activities

Name of Provider: Virginia Home Based Counseling

Local Human Rights Committee: EVA LHRC

Name of Provider LHRC Liaison: Yvonne Green

Name of Licensing Specialist: Carol Schreiner

Number of individuals served by provider in this quarter: 10

Quarter : 4th

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

#### Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

#### Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.



## Status of Complaint Cases

Total of Complaint Cases: : \_\_\_\_\_ 0 \_\_\_\_\_

Number of cases resulting in a violation: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Pending: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Closed: \_\_\_\_\_ 0 \_\_\_\_\_

## Complaint Category Totals:

Assurance of Rights: \_\_\_\_\_ 0 \_\_\_\_\_

Dignity: \_\_\_\_\_ 0 \_\_\_\_\_

Services: \_\_\_\_\_ 0 \_\_\_\_\_

Participation in Decision Making; \_\_\_\_\_ 0 \_\_\_\_\_

Confidentiality: \_\_\_\_\_ 0 \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_ 0 \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_ 0 \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_ 0 \_\_\_\_\_

Work: \_\_\_\_\_ 0 \_\_\_\_\_

Research: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint and Fair Hearing; \_\_\_\_\_ 0 \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_ 0 \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_ 0 \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_ 0 \_\_\_\_\_

## Complaint Resolution Level:

Number of complaints resolved in the Informal Process: \_\_\_\_\_ 0 \_\_\_\_\_

Number of complaints resolved in the Formal Process: \_\_\_\_\_

Below Director: \_\_\_\_\_ 0 \_\_\_\_\_

Director: \_\_\_\_\_ 0 \_\_\_\_\_

Commissioner: \_\_\_\_\_ 0 \_\_\_\_\_

LHRC: \_\_\_\_\_ 0 \_\_\_\_\_

SHRC: \_\_\_\_\_ 0 \_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

**Additional reporting and review requirements as applicable:**

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Same as previously reported

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

None

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Using handle with care since December

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed. None this quarter

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

## Provider Annual Report of Human Rights Activities

Name of Provider: Virginia Home Based Counseling

Local Human Rights Committee: EVA LHRC

Name of Provider LHRC Liaison: Yvonne Green

Name of Licensing Specialist: Gail Schreiner

Number of individuals served by provider this year: 45

Year: 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

#### Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

#### Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

### Status of Complaint Cases

Total of Complaint Cases : 0

Number of cases resulting in a violation: 0

Cases Pending: 0

Cases Closed: 0

**Complaint Category Totals:**Assurance of Rights: 0Dignity: 0Services: 0Participation in Decision Making: 0Confidentiality: 0Access to and Amendment of Services record: 0Restrictions on Freedoms of Everyday Life: 0Use of Seclusion Restraint and Time Out: 0Work: 0Research: 0Complaint and Fair Hearing: 0Determination of Capacity to give consent: 0Authorized Representatives: 0Complaint Resolution: 0Reporting Requirements: 0**Complaint Resolution Level:**Total Number of complaints resolved in the Informal Process: 0Total Number of complaints resolved in the Formal Process: 0Below Director: 0Director: 0Commissioner: 0LHRC: 0SHRC: 0

## Provider Quarterly Report of Human Rights Activities

Name of Provider: A Positive Living LLC

Local Human Rights Committee: Easter Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Reginald Daye

Name of Licensing Specialist: Dennis Riddick

Number of individuals served by provider in this quarter: 0

Quarter : 4<sup>TH</sup> QUARTER 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: n/a

Cases Closed: n/a

#### Total Counts Alleged by Type:

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

#### Total Counts Occurred by Type:

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

## Status of Complaint Cases

Total of Complaint Cases: \_\_\_\_\_ 0 \_\_\_\_\_

Number of cases resulting in a violation: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Pending: \_\_\_\_\_ n/a \_\_\_\_\_

Cases Closed: \_\_\_\_\_ n/a \_\_\_\_\_

### Complaint Category Totals:

Assurance of Rights: \_\_\_\_\_ 0 \_\_\_\_\_

Dignity: \_\_\_\_\_ 0 \_\_\_\_\_

Services: \_\_\_\_\_ 0 \_\_\_\_\_

Participation in Decision Making: \_\_\_\_\_ 0 \_\_\_\_\_

Confidentiality: \_\_\_\_\_ 0 \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_ 0 \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_ 0 \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_ 0 \_\_\_\_\_

Work: \_\_\_\_\_ 0 \_\_\_\_\_

Research: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint and Fair Hearing: \_\_\_\_\_ 0 \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_ 0 \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_ 0 \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_ 0 \_\_\_\_\_

### Complaint Resolution Level:

Number of complaints resolved in the Informal Process: \_\_\_\_\_ n/a \_\_\_\_\_

Number of complaints resolved in the Formal Process: \_\_\_\_\_ n/a \_\_\_\_\_

Below Director: \_\_\_\_\_ n/a \_\_\_\_\_

Director: \_\_\_\_\_ n/a \_\_\_\_\_

Commissioner: \_\_\_\_\_ n/a \_\_\_\_\_

LHRC: \_\_\_\_\_ n/a \_\_\_\_\_

SHRC: \_\_\_\_\_ n/a \_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

**Additional reporting and review requirements as applicable:**

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

n/a

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

n/a

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

n/a

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

n/a

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

n/a

## Provider Annual Report of Human Rights Activities

Name of Provider: A Positive Living LLC

Local Human Rights Committee: Eastern Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Reginald Daye

Name of Licensing Specialist: Dennis Riddick

Number of individuals served by provider this year: 0

Year: 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: n/a

Cases Closed: n/a

#### Total Counts Alleged by Type: 0

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

#### Total Counts Occurred by Type: 0

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

### Status of Complaint Cases

Total of Complaint Cases : 0

Number of cases resulting in a violation: 0

Cases Pending: N/A

Cases Closed: N/A



**Complaint Category Totals: 0**Assurance of Rights: 0Dignity: 0Services: 0Participation in Decision Making: 0Confidentiality: 0Access to and Amendment of Services record: 0Restrictions on Freedoms of Everyday Life: 0Use of Seclusion Restraint and Time Out: 0Work: 0Research: 0Complaint and Fair Hearing: 0Determination of Capacity to give consent: 0Authorized Representatives: 0Complaint Resolution: 0Reporting Requirements: 0**Complaint Resolution Level: n/a**Total Number of complaints resolved in the Informal Process: 0Total Number of complaints resolved in the Formal Process: 0

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_



## Provider Annual Report of Human Rights Activities

Name of Provider: Angel House, Inc.

Local Human Rights Committee: Eastern Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Mr. Stewart Prost

Name of Licensing Specialist: Ms. Nerissa Rhodes

Number of individuals served by provider this year: 0

Year: 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

#### Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

#### Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

### Status of Complaint Cases

Total of Complaint Cases : 0

Number of cases resulting in a violation: 0

Cases Pending: 0

Cases Closed: 0

**Complaint Category Totals:**Assurance of Rights: 0Dignity: 0Services: 0Participation in Decision Making: 0Confidentiality: 0Access to and Amendment of Services record: 0Restrictions on Freedoms of Everyday Life: 0Use of Seclusion Restraint and Time Out: 0Work: 0Research: 0Complaint and Fair Hearing: 0Determination of Capacity to give consent: 0Authorized Representatives: 0Complaint Resolution: 0Reporting Requirements: 0**Complaint Resolution Level:**Total Number of complaints resolved in the Informal Process: 0Total Number of complaints resolved in the Formal Process: 0Below Director: 0Director: 0Commissioner: 0LHRC: 0SHRC: 0

## Provider Quarterly Report of Human Rights Activities

Name of Provider: Envision Family Services, LLC

Local Human Rights Committee: Eastern Virginia LHRC Region 5

Name of Provider LHRC Liaison: Mercedes Santos-Bell & Shanequa Vass, Co-Owners

Name of Licensing Specialist: Nathan Woodard

Number of individuals served by provider in this quarter: 10

Quarter : 4<sup>th</sup> (October 2012-December 2012)

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

#### Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

#### Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

None

## Status of Complaint Cases

Total of Complaint Cases: : \_\_\_\_\_ 0 \_\_\_\_\_

Number of cases resulting in a violation: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Pending: \_\_\_\_\_ 0 \_\_\_\_\_

Cases Closed: \_\_\_\_\_ 0 \_\_\_\_\_

### Complaint Category Totals:

Assurance of Rights: \_\_\_\_\_ 0 \_\_\_\_\_

Dignity: \_\_\_\_\_ 0 \_\_\_\_\_

Services: \_\_\_\_\_ 0 \_\_\_\_\_

Participation in Decision Making: \_\_\_\_\_ 0 \_\_\_\_\_

Confidentiality: \_\_\_\_\_ 0 \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_ 0 \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_ 0 \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_ 0 \_\_\_\_\_

Work: \_\_\_\_\_ 0 \_\_\_\_\_

Research: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint and Fair Hearing: \_\_\_\_\_ 0 \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_ 0 \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_ 0 \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_ 0 \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_ 0 \_\_\_\_\_

### Complaint Resolution Level:

Number of complaints resolved in the Informal Process: \_\_\_\_\_ 0 \_\_\_\_\_

Number of complaints resolved in the Formal Process: \_\_\_\_\_ 0 \_\_\_\_\_

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner:\_\_\_\_\_

LHRC:\_\_\_\_\_

SHRC:\_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation, **None**
- a request for fact-finding (LHRC hearing), **None**
- a Corrective Action Plan, **None**

**Additional reporting and review requirements as applicable:**

**None**

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

**None**

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

**None**

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

**None**

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

**None**

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

**None**

## Provider Annual Report of Human Rights Activities

Name of Provider: Envision Family Services, LLC

Local Human Rights Committee: \_\_\_\_\_

Name of Provider LHRC Liaison: Mercedes Santos-Bell & Shanequa Vass

Name of Licensing Specialist: Nathan Woodard

Number of individuals served by provider this year: 10

Year: 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

#### Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

#### Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

### Status of Complaint Cases

Total of Complaint Cases : 0

Number of cases resulting in a violation: 0

Cases Pending: 0

Cases Closed: 0



**Complaint Category Totals:**Assurance of Rights: 0Dignity: 0Services: 0Participation in Decision Making: 0Confidentiality: 0Access to and Amendment of Services record: 0Restrictions on Freedoms of Everyday Life: 0Use of Seclusion Restraint and Time Out: 0Work: 0Research: 0Complaint and Fair Hearing: 0Determination of Capacity to give consent: 0Authorized Representatives: 0Complaint Resolution: 0Reporting Requirements: 0**Complaint Resolution Level:**Total Number of complaints resolved in the Informal Process: NoneTotal Number of complaints resolved in the Formal Process: None

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_

## Provider Quarterly Report of Human Rights Activities

Name of Provider: Cary Associates LLC, DBA as Youth Empowerment Services

Local Human Rights Committee: Eastern Virginia Regional Local Human Rights Committee

Name of Provider LHRC Liaison: Stewart Prost

Name of Licensing Specialist: Unassigned

Number of individuals served by provider in this quarter: None

Quarter : Oct-Dec 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: none

Cases Pending: none

Cases Closed: none

**Total Counts Alleged by Type:** None

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

**Total Counts Occurred by Type:** None

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

**Youth Empowerment Services is still unlicensed and is currently not serving any clients.**

### Status of Complaint Cases

Total of Complaint Cases: \_\_\_\_\_

Number of cases resulting in a violation: \_\_\_\_\_

Cases Pending: \_\_\_\_\_

Cases Closed: \_\_\_\_\_

**Complaint Category Totals: none**

Assurance of Rights: \_\_\_\_\_

Dignity: \_\_\_\_\_

Services: \_\_\_\_\_

Participation in Decision Making: \_\_\_\_\_

Confidentiality: \_\_\_\_\_

Access to and Amendment of Services record: \_\_\_\_\_

Restrictions on Freedoms of Everyday Life: \_\_\_\_\_

Use of Seclusion Restraint and Time Out: \_\_\_\_\_

Work: \_\_\_\_\_

Research: \_\_\_\_\_

Complaint and Fair Hearing: \_\_\_\_\_

Determination of Capacity to give consent: \_\_\_\_\_

Authorized Representatives: \_\_\_\_\_

Complaint Resolution: \_\_\_\_\_

Reporting Requirements: \_\_\_\_\_

**Complaint Resolution Level:**

Number of complaints resolved in the Informal Process: \_\_\_\_\_

Number of complaints resolved in the Formal Process: \_\_\_\_\_

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_

**Provide details, by date of occurrence, of all cases that resulted in the following:**

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

**Additional reporting and review requirements as applicable:**

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

**None**

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

***As of 1/4/13 we have made contact w/DBHDS and have been told that they are should be reviewing our packet by January 31, 2013 (we submitted in March2012). We anticipate receiving information by February 2013.***

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

**None**

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

***We are in full support and understanding of our Local Human Rights Committee. We pledge to fully cooperate and provide input, suggestions, and assistance when asked, offered, or requested.***

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

None

## Provider Annual Report of Human Rights Activities

Name of Provider: Cary Associates, LLC dba Youth Empowerment Services

Local Human Rights Committee: Eastern Virginia Regional Local Human Rights Committee

Name of Provider LHRC Liaison: Theresa Sands-Dawling

Name of Licensing Specialist: Unassigned

Number of individuals served by provider this year: None

Year: 2012

### Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: none

Cases Pending: none

Cases Closed: none

#### Total Counts Alleged by Type:

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

#### Total Counts Occurred by Type:

Physical: \_\_\_\_\_ Sexual: \_\_\_\_\_

Verbal: \_\_\_\_\_ Neglect: \_\_\_\_\_

Neglect (Peer to Peer): \_\_\_\_\_

Exploitation: \_\_\_\_\_

Other: \_\_\_\_\_ Restraint: \_\_\_\_\_

***As of 12/31/12, Youth Empowerment Services is unlicensed and is currently not serving any clients.***

### Status of Complaint Cases

Total of Complaint Cases : None

Number of cases resulting in a violation: None

Cases Pending: None

Cases Closed: None

**Complaint Category Totals:**

Assurance of Rights: None

Dignity: None

Services: None

Participation in Decision Making: None

Confidentiality: None

Access to and Amendment of Services record: None

Restrictions on Freedoms of Everyday Life: None

Use of Seclusion Restraint and Time Out: None

Work: None

Research: None

Complaint and Fair Hearing: None

Determination of Capacity to give consent: None

Authorized Representatives: None

Complaint Resolution: None

Reporting Requirements: None

**Complaint Resolution Level:**

Total Number of complaints resolved in the Informal Process: None

Total Number of complaints resolved in the Formal Process: None

Below Director: \_\_\_\_\_

Director: \_\_\_\_\_

Commissioner: \_\_\_\_\_

LHRC: \_\_\_\_\_

SHRC: \_\_\_\_\_

## EVLHRC QUARTERLY MEETING DATES AND LOCATIONS 2013

1 <sup>ST</sup> Quarterly Meeting	9:00 a.m., Thursday January 24, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
2 <sup>nd</sup> Quarterly Meeting	9:00 a.m., Thursday April 25, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
3 <sup>rd</sup> Quarterly Meeting	9:00 a.m., Thursday July 25, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
4 <sup>th</sup> Quarterly Meeting	9:00 a.m., Thursday October 24, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502